

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: PRINT MEDIA APPARATUS FOR YOUNG  
CHILDREN

Attorney Docket Number:: 020824-005310US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 8

Small Entity?:: No

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Michael  
Middle Name:: C.  
Family Name:: Wood  
Name Suffix::  
City of Residence:: Orinda  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 27 La Noria  
City of Mailing Address:: Orinda  
State or Province of mailing address:: CA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 94563

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Jason  
Middle Name::  
Family Name:: Avery  
Name Suffix::  
City of Residence:: Berkeley  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 2014 Los Angeles Street  
City of Mailing Address:: Berkeley  
State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94707

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Larry

Middle Name::

Family Name:: Lynch

Name Suffix::

City of Residence:: Las Gatos

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 149 Via De Tesoros

City of Mailing Address:: Las Gatos

State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 95032

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Michael

Middle Name::

Family Name:: Perkins

Name Suffix::

City of Residence:: Santa Clara

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 611 Hillsdale Avenue

City of Mailing Address:: Santa Clara

State or Province of mailing address:: CA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 95051

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: John  
Middle Name::  
Family Name:: Caldwell  
Name Suffix::  
City of Residence:: San Jose  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 2984 Silver Estates  
City of Mailing Address:: San Jose  
State or Province of mailing address:: CA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 95135

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Designation::	Representative Number::	Representative Name::
Primary	40,456	Patrick R. Jewik

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An Appn claiming benefit under 35 USC 119(e) of	60/448,782	02/18/03
This Application	An Appn claiming benefit under 35 USC 119(e) of	60/486,392	07/10/03

**Foreign Priority Information**

Country::	Application number::	Filing Date::
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**Assignee Information**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::